WASHINGTON, March 27, 2020 — The Larry A. Green Center, in partnership with the Primary Care Collaborative, just released real-time survey results of primary care clinicians (conducted March 20-23), measuring the impact of COVID-19 on their practices.

“There's a widespread willingness among patients to do telehealth visits, and that way of providing care keeps both patients and clinicians safe,” said Ann Greiner, President and CEO of the Primary Care Collaborative. “But there still are a large number of practices that say they're not doing visits remotely—6 in 10 not doing video visits and 7 in 10 not doing e-visits. There are a lot of practices and patients who aren’t set up for telehealth yet.”

“Since last week’s survey, we saw a doubling or more of practices reporting that their frontline staff were out due to illness or self-quarantine,” said Rebecca Etz, PhD, Co-Director of The Larry A. Green Center and Associate Professor of Family Medicine and Population Health at Virginia Commonwealth University. “Almost half (46%) of the practices said a clinician was out, and many (44.5%) had a nursing staff member out.”

Topline analyses include:

- Nearly half (49%) are reporting that their practice is experiencing a “severe impact” (the highest possible response) due to the current status of COVID-19, and this amount has doubled since the previous week (when it was 21% choosing “severe impact”). Another 27% this week report “close to severe” impact.
- In terms of testing capabilities, less than half (43%) of respondents still report no capacity to test patients for COVID-19 at their practice. This is shows little change from last week. Another 39% report having capacity to test based on CDC guidelines/restrictions only.
- The biggest stressors on practices are now: 1) reduced well/chronic visits, and 2) staffing shortages due to staff illness/self-quarantine.
- As telehealth takes a more prominent role, respondents report high patient amenability to virtual services but much less certainty on how those services will be paid for.
- Only 46% of respondents reported that they believe the majority (60% or more) of their office visits/contacts are reimbursable.

This is the second consecutive week of this survey initiative. Results reflect input from over 500 primary care physicians, nurse practitioners, and PAs. Respondents spanned an even wider cross-section of the country this week, covering 48 states plus Puerto Rico and the Virgin Islands. A third own their practice, and nearly three-quarters (72%) work at a practice with more than three clinicians. Respondents ranged among practice types, including rural (17%), community health centers (18%), and practices associated with an academic medical center (34%).

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About the Primary Care Collaborative:

Founded in 2006, the Primary Care Collaborative (PCC) is a nonprofit multi-stakeholder membership organization dedicated to advancing an effective and efficient health system built on a strong foundation of primary care and the patient-centered medical home. Representing a broad group of public and private organizations, PCC’s mission is to unify and engage diverse stakeholders in promoting policies and sharing best practices that support growth of high-performing practices.
primary care and achieve the “Quadruple Aim”: better care, better health, lower costs, and greater joy for clinicians and staff in delivery of care.

**About The Green Center:**

The Larry A. Green Center for the Advancement of Primary Health Care for the Public Good is a research group founded by Rebecca Etz, PhD at Virginia Commonwealth University and Kurt Stange, MD, PhD at Case Western Reserve University. The Green Center works to reclaim and reconstitute the intellectual foundations of primary care, to advance the science of medicine learned and practiced within layered and competing social frameworks of meaning, and to deliver on a now 50 year old promise: better health and improved health care through a synergistic focus on both humanism and healing. We are nimble, inquisitive, curious, and open. We make personal doctoring and innovation visible.